

## PART 4

### THIS DOCUMENT IS REQUIRED FOR ALL HOMEOWNERS

**DEPARTMENT OF ENVIRONMENTAL PROTECTION  
MEMORANDUM OF AGREEMENT  
RESIDENTIAL PROPERTIES**

This Memorandum of Agreement (Agreement) has been developed so that any party interested in conducting a cleanup at a residential property can do so with oversight from the Department. The Department will provide oversight as long as the Department is reimbursed for the cost of its review. This Agreement must be completed in its entirety by the party interested in conducting the cleanup activities and/or the party's authorized agent, and shall include a fully executed copy of the attached certification. The Department can not process any applications unless all the information requested is complete and all questions are answered to the satisfaction of the Department. Once completed the Agreement must be submitted to the following address:

**Division of Responsible Party Site Remediation  
Bureau of Field Operations  
401 East State Street, PO Box 434  
Trenton, NJ 08625-0434**

**Attention: Section Chief - Case Assignment Section  
(609) 292-2943**

Answer all questions as completely as possible. If you have any questions when completing this form, it is recommended that you contact the Case Assignment Section at (609) 292-2943 between the hours of 8:00 AM and 5:00 PM for assistance.

This Agreement is entered into pursuant to the authority vested in the Commissioner of the New Jersey Department of Environmental Protection (hereinafter "the Department") by N.J.S.A. 13:1D-1 et seq. and N.J.S.A. 58:10B et seq. and the Water Pollution Control Act, N.J.S.A. 58:10A-1 et seq., the Solid Waste Management Act, N.J.S.A. 13:1E-1 et seq. and the Spill Compensation and Control Act, N.J.S.A. 58:10-23.11 et seq. and duly delegated to the Section Chief, Division of Responsible Party Site Remediation, Bureau of Field Operations pursuant to N.J.S.A. 13:1B-4.

This Agreement is to be used as a formal request for Department oversight of cleanup activities pursuant to the Procedures for Department Oversight of the Remediation of Contaminated Sites (N.J.A.C. 7:26C et seq.) and review of reports submitted pursuant to the Technical Rules for Site Remediation (N.J.A.C. 7:26E et seq.).

## MEMORANDUM OF AGREEMENT FOR RESIDENTIAL PROPERTIES

CASE NUMBER \_\_\_\_\_

DATE \_\_\_\_\_

A. Property Address \_\_\_\_\_  
Zip Code \_\_\_\_\_ Municipality \_\_\_\_\_ County \_\_\_\_\_  
**Tax Block and Lot Number(s)** \_\_\_\_\_  
\*(available from local tax assessor's office)\*  
Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ Acreage \_\_\_\_\_  
Geographic Boundaries \_\_\_\_\_

B. **Party signing this Agreement** (contractors cannot sign MOA)  
Name \_\_\_\_\_ Affiliation \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Municipality \_\_\_\_\_ State \_\_\_\_\_  
Zip Code \_\_\_\_\_ **Telephone #** \_\_\_\_\_

C. **Current Property Owner(s)** (If different than B)  
Name(s) \_\_\_\_\_  
Street Address \_\_\_\_\_  
Municipality \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

D. Select which phase(s) of the remediation process are to be performed and what document(s) are to be submitted pursuant to the MOA being requested.

☐ **Remedial Action Workplan**

☐ **Remedial Action Report**

E. Who will be the contact for all matters of this application?  
Name \_\_\_\_\_ Title \_\_\_\_\_  
Affiliation \_\_\_\_\_  
Address \_\_\_\_\_  
City/Town \_\_\_\_\_ State \_\_\_\_\_  
Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

F. Provide the information requested below on the previous owners of the property and the entities who operated at the property.

Name	Owner or Operator	From	To
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

G. Did the discharge occur from an (check appropriate answer):

\_\_\_\_ Above Ground Storage Tank  
\_\_\_\_ Underground Storage Tank  
\_\_\_\_ Other Please describe \_\_\_\_\_

H. Did the discharge impact groundwater?

Yes \_\_\_\_ No \_\_\_\_ Unknown \_\_\_\_

I. Has a loan/grant application for the UST Fund been filed with the Department?

Yes \_\_\_\_ No \_\_\_\_ MOA being submitted with UST Fund Application \_\_\_\_

J. Is the property located in a Neighborhood Empowerment Zone as defined in P.L.1996,c.62 (New Jersey Urban Redevelopment Act) ?

Yes \_\_\_\_ No \_\_\_\_ Unknown \_\_\_\_

K. If the discharge involves a substance other than heating oil or was not from a storage tank, please describe the substance, and/or how the discharge occurred.

\_\_\_\_\_  
\_\_\_\_\_

L. To the best of your knowledge, was the property ever used for purposes other than residential (ie. orchard, farming, etc.)?

Yes \_\_\_\_ No \_\_\_\_ If yes, please describe:

\_\_\_\_\_  
\_\_\_\_\_

The following certification shall be signed by the highest ranking individual with overall legal responsibility for implementing the remediation of a site, but shall not include contractors or consultants.

1. For a corporation, by a principal executive officer of at least the level of vice president;
2. For a partnership or sole proprietorship, by a general partner or the proprietor, respectively, or;
3. For a municipality, State, Federal or other public agency, by either a principal executive officer or ranking elected official.

The certification may also be signed by a duly authorized representative of those persons described above. A person is a duly authorized representative only if:

1. The authorization is made in writing by a person described above;
2. The authorization specifies either an individual or a position having a responsibility for the overall operation of the site or activity, such as the position of plant manager, or a superintendent or person of equivalent responsibility (a duly authorized representative may thus be either a named individual or an individual occupying a named position);
3. The written authorization is submitted to the Department; and
4. If the authorization is no longer accurate because a different individual or position has responsibility for the overall operation of the facility, a new authorization satisfying the requirements of this subsection shall be submitted to the Department prior to or together with any reports, information or applications to be signed by an authorized representative.

" I certify that I am fully aware of the requirements of N.J.A.C 7:26C-3, specifically as it pertains to the Agreement by rule. Further, I agree to pay the Department's oversight costs for the Department's review of any submissions pursuant to the Agreement until such time as I notify the Department that it is no longer feasible or desirable for me to continue with the Agreement."

**APPLICANT**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NAME (PLEASE PRINT)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NOTARY SIGNATURE

**DEPT OF ENVIRONMENTAL PROTECTION**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NAME (PLEASE PRINT)

The Department will review the application and will respond in writing, within thirty calendar days from receipt of the application, as to whether the application is administratively complete or not. If the application is incomplete the deficiencies shall be listed. If the application is complete, the applicant will be deemed to have entered into an Agreement by rule pursuant to N.J.A.C. 7:26C-3.3.